

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Indian Health Service
Rockville, Maryland 20857'

INDIAN HEALTH SERVICE CIRCULAR NO. 97-04 Refer to: OD

CHARTER
EXECUTIVE LEADERSHIP GROUP OF THE
I N D I A N
INDIAN HEALTH LEADERSHIP COUNCILS

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1. **PURPOSE.** The Executive Leadership Group (ELG) is a permanent standing committee of the Indian Health Service (IHS) Indian Health Leadership council (Council). The ELG plans and guides Council business, ,thereby facilitating the Council's efforts to ensure that IHS programs, as designed and operated, achieve objectives consistent with the IHS mission. The ELG also promotes organizational values consistent with the IHS vision.
2. **RESPONSIBILITIES.** The ELG performs the foilowing functions:
 - A. Guides the business of the Council by planning, preparing for, and following up on meetings of the Council; e.g., develops agendas for meetings, assigns staff and resources to ensure that meeting objectives can be met, reviews presentation materials before each meeting to ensure completeness and relevance, tracks actions resulting from Council recommendations, and reports regularly to the Council.
 - B. Functions as a proactive, representative working body of the Council; advises senior management; carries out special work assignments for the Office of the Director; and appropriately communicates and consults with the full Council about these activities.

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- C. Monitors agency operations by reviewing reports of program and Area reviews, especially reports by external sources and those reflecting trends and cross cutting issues; monitors other evaluations and studies; monitors research project findings; and monitors round tables to accelerate institutional learning and promote continuous performance improvement.
 - D. Assures work products are completed in an environment of mutual respect and influenced by an organizational' culture that requires inclusive participation and consensus building.
 - E. Develops charters for new standing and ad hoc committees for Council approval, when appropriate.
3. **MEMBERSHIP.** Members of the ELG include: the Deputy Director, IHS, who serves as Chair; the Director, Office of Management Support; the Director, Office of Public Health; three Area Directors; the chair, National Council of Service Unit Directors; the Chair, National Council of Clinical Directors, and the Chair, National Council of Nursing.

The-IHS Area Directors elect three representatives to the ELG for staggered, 3-year terms. Each Area Director's term of representation on the ELG shall expire at the end of a fiscal year.

4. **AUTHORITIES.** The ELG shall have- and carry out the responsibilities and authorities delineated in this Charter and additional responsibilities and authorities that may be assigned or delegated to the ELG by the Director.
5. **MEETINGS AND STAFF SUPPORT** The ELG shall meet prior to each quarterly Council meeting and immediately following the last day of each quarterly Council meeting. The Chair may call additional meetings as needed. All members of the ELG shall be available during Council meetings to assist those presiding over meeting sessions.

Staff support for the ELG is arranged as the Chair deems necessary and is approved by the Director.

6. **REPORTS.** The ELG shall report on its activities to the Council at least quarterly. Reports shall be provided to the Council after each ELG meeting through scheduled conference calls, electronic mail, and/or presentations during Council meetings.

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7. **EVALUATION OF PERFORMANCE** The ELG's purpose is to improve the Council's effectiveness. Its performance in this regard, and completion of the following minimum actions, will be evaluated annually:
- A. The Charter is reviewed and reaffirmed or revised by the full Council.
 - B. A self-assessment is completed by the ELG, in consultation with at least two Council members and who are not members of the ELG. The two consultant Council members shall be designated by the Council. This assessment will determine the extent to which: (1) the work the ELG has commissioned meets the ELG's established standards; (2) meeting agendas reflect and promote accomplishment of the Council's strategic agenda; (3) work the ELG has commissioned addresses the Council's Key Measures and the Agency's objectives, vision, and values.

The ELG may undertake, or commission other reviews and assessments when appropriate.

8. **SUPERSEDURE.** This circular supersedes IHS Circular 95-7, "Charter, Executive Leadership Group of the Indian Health Service Council of Area and Associate Directors," dated March 27, 1995.
9. **EFFECTIVE DATE,** This circular is effective upon date of signature.



Michael H. Trujillo, M.D., M.P.H., M.S.
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